

'Eugenics is the science which deals with all influences that improve the inborn qualities of a race; also with those that develop them to the utmost advantage.'—SIR FRANCIS GALTON (1904)

The Eugenics Review

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NOTES OF THE QUARTER

MIGRATION FACTS

THE IMMIGRANTS BILL and the outbreak of smallpox in Great Britain have brought the subject of population movements very much to the fore in the minds of everyone. Some further numerical information has been provided by the recent issue of the Report for 1960 of the Oversea Migration Board (Cmnd. 1586). Members will recall that the earlier publications of this Board have been the subject of comment in the REVIEW from time to time.

Although, as was recorded in our July 1961 issue, migration to and from the United Kingdom was exactly balanced during the four years 1956–59, immigrants did exceed emigrants during 1958 and 1959, and this state of affairs continued more strongly during 1960, when fewer men, women and children—124,000 in all—left this country and more—206,000—entered it. Entrants thus exceeded exits by 82,000, or nearly as much as in the two preceding years taken together. It is understood that the figures for 1961 will show an even higher excess of arrivals over departures.

The growth in immigration was largely attributable to Commonwealth citizens, who accounted in 1960 (according to information supplied by the Ministry of Pensions and National Insurance) for nearly one-half of all those received into Great Britain. Greater num-

bers came in from Eire and other countries also. Most of the emigrants were leaving to go to Commonwealth countries.

The net balance of population movement into and out of the United Kingdom, if taken over the period 1953–60, would still be outward, although the inclusion of the data for 1961 would probably transform this result. This wider perspective may help to explain the success with which, in general, the immigrants have been absorbed into the British labour market, although other factors such as the state of the economy and the preference of the home population for some types of employment at the expense of others have no doubt contributed substantially as well.

THE IMMIGRATION BILL

Sir Richard Pilkington writes: Balfour once defined hard work as having to say Yes or No on insufficient information. The same applies when the information is voluminous but the arguments to act or not to act are almost evenly balanced.

As the centre of a multiracial Commonwealth it would be abhorrent from every point of view to have a colour bar in this country. As a Christian society we believe in the "Brotherhood of Man." We condemn the methods by which South Africa applies her policy of apartheid. And it has been our practice in the past to maintain an (almost) open door policy towards anyone sensible enough (or rash enough) who wishes to come and live here.

On the other hand, our island is already very crowded; many think overcrowded. Most other

states in the Commonwealth themselves practise immigration control. If we do not take action now, do we do so at some later date when what is now a comparative trickle has become a flood? Will it not be far more difficult to take action then as opposed to now? If we do take action now, that action must be applied irrespective of race. The Irish, as so often, represent a conundrum for geographical reasons which are by now pretty well understood. But if legislative action is to be taken, then the machinery ought to be there to clamp down and include the Irish with everybody else if or when it seems necessary.

It may be that in future ages mankind will become coffee coloured; differentiation may have ceased and a reverse process, due to increasing ease of transport, may have set in. But if this happens at too great a speed, friction between races is inevitable.

It is already only too apparent that in those countries where there is a strongly pronounced alien element, friction not only exists but is getting rapidly worse; this is all the more so when the alien element, through a higher birth rate, is clearly increasing progressively year by year. It would be foolish to close our eyes to this when the examples are so very plain. The "Little Rock" incident in America is, I fear, more of a beginning than an end.

It is not our own generation which will suffer if nothing is done. It is later generations which will reap the whirlwind. We must not push the burden from off our shoulders for them to deal with. We must ourselves tackle it here and now.

The proposed Immigration Bill is not a very severe measure. It will still allow a considerable influx, perhaps too big an influx, but at least the machinery of action will have been set up.

PAPAL ENCYCLICALS

ON MAY 15TH 1961 Pope John XXIII published his encyclical letter *Mater et Magistra*.^{*} The occasion for this re-evaluation of social problems in the light of Christian teaching was the seventieth anniversary of the publication of Pope Leo XIII's notable encyclical *Rerum novarum*—the "Workers' Charter", as it has been called. Pope John reviews both this encyclical

and the intervening *Quadragesimo anno* (1931) of Pope Pius XI, as well as the teaching of the latter's successor, Pius XII, and surveys the changes which have come over the social and political scene during the last two decades. His purpose is to develop and refine the teaching of his distinguished predecessors, and to apply it to the contemporary situation; and in general his wide knowledge, vision, acute diagnosis, and wise policies will win the respect of all impartial students of the encyclical, though they may not assent to all that he says.

To readers of this REVIEW, the Pope's observations on the population problem will be of particular interest, although they occupy but a small section of the encyclical. He expresses dissent from the terms in which the problem is usually stated—that is, that an inevitable rise in the world's population will, unless checked, cause both acute food shortage generally, and special hardship in the under-developed countries. In his view, the argument that the growing disparity between population and resources is likely soon to reach a critical point is based upon "such unreliable and controversial data" that it can be regarded only as "of very uncertain validity"; and that there is no real justification for the "demand in some quarters for a drastic policy of birth control, or even birth prevention."

In fact, he contends, our natural resources are virtually inexhaustible, and the true solution to the problem is "not to be found in expedients which offend against the divinely established moral order and which attack human life at its very source, but in a renewed scientific and technical effort on man's part to deepen and extend his dominion over Nature." It may be thought, however, that this argument is likewise open to the charge of uncertain validity, and of disregard for the realities of the situation. Pope John appeals earnestly for a solution which does not offend against divine law and human dignity; and non-Roman Catholic theologians would in general claim that such a solution lies to hand.

GREATER LONGEVITY

A RECENT NOTE in *Nature* has drawn attention to the advance of the average expectation of life at birth, which according to the mortality experience of industrial assurance policyholders in the

^{*} *New Light on Social Problems*. London, 1961. C.T.S. Pp. 68. Price 1s. 6d.

U.S.A. reached the record figure of 70½ in 1960. This is an increase of five years over 1946, ten years over 1937, twenty-four years over 1909 and thirty-six years over the 1880s. The figures for the whole population of that country are generally similar.

Although these increases are striking, they are no more remarkable than those in many other countries. Here are a few examples taken from the United Nations *Demographic Year Books* for 1948 and 1959:

ENGLAND AND WALES	1910-12	53
	1930-32	61
	1958	71
U.S.S.R.	1896-97	32
	1926-27	44
	1955-56	66
THAILAND	1937-38	40
	1947-48	50
CHILE	1930	37
	1952	52
JAMAICA	1919-21	38
	1950-52	57

The figures all represent the mean of the data for the separate sexes.

As a broad generalization it would not be unreasonable to surmise that in recent decades the expectation of life at birth has increased by fifty per cent or more over large areas of the globe. This, then, is the measure of the extent to which mortality has fallen and—bearing in mind that fertility has changed only in much smaller degree—of the extent to which world population growth has been facilitated.

It is a pity that more up-to-date figures are not available and that a complete world analysis cannot be given at the moment. If this were possible it would indicate in some degree the prospects for further improvements. By 1962 these prospects may well be quite modest for the countries shown in this note, subject always to the possibility of a striking new scientific discovery to arrest ageing or control cancer. For other countries such as India or China, however, the chance of continued improvements in longevity

arising from the application of present-day knowledge must still be very considerable.

BIRTH CONTROL IN GREAT BRITAIN AND THE U.S.A.

COMPREHENSIVE STUDIES OF fertility by means of questionnaires directed to samples of the population have been much in the news lately. During the last few years, two separate investigations have taken place in America, a report on the second of which is reviewed on page 33 of this issue of the REVIEW. The first was similarly noticed in October, 1959. In Britain, the first nationally representative study of attitudes to contraception and of birth control practices has recently been completed (see the annotation on page 49). It is of interest, therefore, to compare and contrast the main findings of these surveys.

Perhaps the most striking result is the almost complete frankness with which married couples (or in some cases one member of each couple) have responded to the inquiries. In the United States, this is not so novel as in Great Britain, where no more than fifteen years ago it was considered that only the medical adviser could be expected to elicit useful answers to this type of question. Less surprising is the proportion of people who are now users of contraceptives: some ninety per cent in America, and over seventy per cent in Britain—where the figure has grown steadily among successive marriage cohorts. In both countries there are few class differences in the use of birth control, and the distinctions between the practices of the various religions are now the principal subject of interest; in both countries this means, in effect, studying how Roman Catholics differ from Protestants, although in the U.S.A. Jews were sufficiently numerous, even in the rather small samples drawn, to show a third separate pattern of behaviour.

As to the principal contraceptive methods adopted, the two American inquiries are rather difficult to compare closely, because the descriptions of the methods and the manner of classifying the data, in cases where more than one method was used, differ. It appears, however, that American couples, at least those in urban centres, adopt sophisticated methods, involving

appliances of various kinds, whereas withdrawal is still traditional in Great Britain, where expert advice is less often sought and where there has been little change in practice over several decades.

Although the three sample inquiries all differed from one another in their aims, in their coverage and in the manner in which the questions were put to the public, the general picture they present stands out quite clearly. It will be of even greater interest to compare the general tone of the result—in so far as it *can* be compared—with that of the responses of the *Society's* own investigation into attitudes towards Eugenics; the questionnaire was reproduced on pages 180–81 of the October 1961 number of the REVIEW, and an analysis of the answers received during the course of a pilot survey will be published shortly.

MENTAL SUBNORMALITY AND COMMUNITY CARE

Dr. R. F. Tredgold writes: Under this title has appeared a new broadsheet by P E P*, which follows on their earlier publication (No. 447) on Community Health Services. It describes the prevalent concepts of Subnormality, the Community Services in being, or planned, and the legal changes of the Mental Health Act, stressing the changes in professional and public opinion which have made these possible.

It is pointed out that the old concept of custodial care is being replaced by a more enlightened and hopeful one of education—even of the low grades; that subnormality is not now to be regarded as the result of either heredity or environment, but of the inter-action of the two; that many patients in institutions at present may become more retarded than they would be at home, and get worse as they grow older; and that the research done on causation is opening up possibilities of prevention, though as yet these are limited.

All this sounds good; and we may tend to bask in a glow of self-satisfaction at our generation's progress, which can be enhanced by some rather unworthy (but unfortunately highly quotable) remarks about the naïve theories of fifty years ago, when the Mental Deficiency Acts were planned, and the crude social prejudices of the

planners. How much more enlightened we are to-day!

But are we as effective? What of our actions? Are we doing any more, or even as much, with the knowledge we have? It is very easy to ignore, or denigrate, the work done by the staffs of public and private mental deficiency institutions over these fifty years. Many of them certainly knew from their own experience that the subnormal were educable with skill and patience, and with special opportunities, which were available in some institutions and not at home; and patients were not *only* admitted for custodial care. It is true that this work has been less effective in the last decade, with the consequent deterioration described, but in this period there has been a gradual decrease of skilled and experienced staff. As the broadsheet says, "Merely to repeat that mental deficiency hospitals tend to be overlarge and understaffed is not particularly constructive." Nor, of course, is it particularly encouraging to the present, diminishing, staff. What are we doing constructively?

At the end of 1959, there were nearly 6,000 cases, half of whom were regarded as urgent, waiting for admission to hospital; there were 5,000 *adult* imbeciles waiting for vacancies at training and occupation centres; there were only a few hostels, and only a third of the local authorities had proposals for more; there was only a handful of "special care units." Moreover, if family care is healthier for many subnormals it is yet carried out at considerable emotional, and sometimes financial strain to the family, and we must ask if these families get all the help they need from the medical and social services. Another recent publication suggests this is seldom so.*

The pioneers of 1913 may be said to have put mental deficiency on the map. Our map is now much more accurate, and more detailed; the question is, are we bothering to use it to any effect?

MENTALLY HANDICAPPED CHILDREN

THE PAEDIATRIC SOCIETY of the South-East Metropolitan Region has produced an important memorandum on *The Needs of Mentally*

* Tizard, J. and Grad, J. C. *The Mentally Handicapped and Their Families*. See review on p.39 of this issue.

* *Planning*. December 1961, No. 457.

Handicapped Children, the conclusions of a year's study of a group of people whose work is concerned with defective children. The group included general practitioners, paediatricians, psychiatrists, public health officers, a psychologist and a magistrate. Their terms of reference were "to prepare a report outlining the services required to meet the needs of severely subnormal children and their families in the South-East Metropolitan Region," but their conclusions are of general applicability and add a reality born of personal experience to the provisions of the 1959 Mental Health Act.

Their recommendations include:

More research into both causation of mental defect and methods of education.

Social services to replace the present haphazard and inadequate advice and support given to families of defective children.

More rather than less residential accommodation and more training centres but small institutions more closely situated to and integrated with the communities they serve, and

Greater availability of paediatric, psychiatric and psychological services for diagnosis and assessment of defective children and advice both to parents and to educational and public health services.

This is an authoritative and practical document which should be read in conjunction with *The Mentally Handicapped and Their Families* and the PEP report discussed above.

THE GENETIC CODE FOR PROTEINS AND A SEX LINKED BLOOD GROUP IN MAN

TWO DISCOVERIES IMPORTANT for human genetics have been announced in January this year. One is of general genetic significance, and provides the first clear concept of the way in which the deoxyribonucleic acid (DNA) molecules of the chromosomes code the formation of proteins, and so exert their influence on development.* Particular sequences of three bases along the deoxyribose phosphate backbone of DNA are specific for particular amino-acids. These sequences of bases in triplets control the nature and sequence of amino-acids in a protein, and hence the specificity of the protein. It is to be hoped that it will not be long before *in vitro*

studies relate many individual base sequences to individual amino-acids. Work of this kind brings appreciably nearer the day when man can attempt directly to induce desired gene mutations, first in domestic plants and animals, and later in himself.

The second report is of more strictly human interest, and is of the discovery of a sex-linked blood group.† The only supply of the anti-serum is at present from a single individual in America who has had repeated transfusions in the course of treatment for a hereditary bleeding disease. If further sources of this precious anti-serum are found, it will greatly facilitate the drawing of a map of all the gene loci on the X chromosome, including those for colour blindness, classical haemophilia, Christmas disease, the severest type of muscular dystrophy and many other conditions. The new blood group will also greatly help in the detection of women who "carry" the sex-linked genes for such conditions, whenever the mutant gene concerned occurs at a site on the X chromosome close to the gene locus of the new blood group.

A SCHOOL OF HUMAN STUDIES

IF WE ASSUME that the bombs will not fall, then the paramount problem of to-day is that of the population explosion and its repercussions. This is the problem of humanity in bulk, in all aspects, genetic and qualitative, racial and relational, nutritional and economic, to name but a few. The problem so far is studied piecemeal, if at all, and few seek that essential integration which should form an important part of the general understanding of educated people everywhere. It is undeniable that the great majority of educated people is still blandly unaware of the unprecedented *human* problem which is now all around us.

Here surely might be the opportunity for one of our new Universities. With new enthusiasm and appreciation of reality, it could build up a School of Human Studies, which would quickly become notable as a place of pioneer thought. Reality in human affairs is inescapable and it can only be met by understanding based on deliber-

* Crick, F. H. C., Barnett, L., Brenner, S., Watts-Tobin, R. J. (1961). *Nature*, 192, 1227.

† Mann, J. D., Cahan, A., Gelb, A. G., Fisher, N., Hamper, J., Tippet, P., Sanger, R., Race, R. R. (1962). *The Lancet*, i, 8.

ate integration. In the University setting the approach to reality would be by a deliberate integration of biology, medicine, economics, demography, philosophy and so on.

A new School in a new University could start with the advantage of escaping something of the load of traditional canalized interests. There would be escape from the medical tradition of interest in abnormality and the sick, rather than normality and health. Medical men in general are not interested in populations but in persons. Human ecology (alias social medicine) has come to be concerned with the geography of disease rather than provisioning as an aspect of health. Human geography is mainly still in the descriptive phase of its own evolution and is a weak sister on the geographical fringe. Zoologists are interested in all species except our own. Geneticists again are still, because of the complexity of the subject, slow to escape the descriptive phase. But some human geneticists begin to be fairly close to what should be one aspect of a School of Human Studies.

Likewise the demographers count, describe and prophesy but as yet are rarely concerned with the implications, or the prospects, for those who are counted. The economists and the sociologists have interests which are relevant but the present divorce between them and the biologists is all too great. However, a few begin to publicize the problem of personal fulfilment by means more sensible than excessive material consumption. Again the productive departments, agriculture, forestry, fisheries and mining, have a concern with the extent of human increase but commonly a narrow one, seeing human beings as little more than consuming mouths, the agents of despoliation, and the expenders of fossil fuel.

The philosophers and those who have interest in ethical problems, are laggard in contemplating the new human dilemma set by the overthrow of death in relation to birth. Yet the last Lambeth Conference courageously faced it for the Anglican community at the personal level. Present world organizations such as F.A.O. and W.H.O. are admirable but limited in their terms of reference: they deal with men and not humanity.

The human problem to-day is so vast that there is surely need for a School which would attempt synthesis rather than still further ex-

tended analysis of isolated factors. Indubitably, further analysis is required, but the paramount present need is a special effort in synthesis. That is the opportunity for Human Studies in a new University.

The fact that the International Council of Scientific Unions is proposing a world-wide Biological Year, comparable with the International Geophysical Year of 1957/8, should make this proposal especially apt at this time.

VOLUNTARY STERILIZATION

THE MAIN TOPIC in this number of the REVIEW is the history of the voluntary sterilization movement in the United Kingdom which is discussed, largely from the Eugenics Society's point of view, in Dr. C. P. Blacker's article "Voluntary Sterilization: the last sixty years."

There is no one more competent than Dr. Blacker to set down an account of all that was done, up to the start of the second world war, to influence the leaders of Church and State towards taking a sympathetic attitude to the voluntary sterilization of the mentally handicapped, and to turn public opinion in the same direction.

Dr. Blacker was at the centre of the movement, and it is easy to suppose that his was the driving force behind the Eugenics Society's pioneering work for the voluntary sterilization of mentally deficient or insane persons. With access to old files and reports, he has now written an account of the efforts and achievements of the many enthusiastic pioneers between the two world wars. He has thus produced a valuable historical document which, while of great immediate interest, will be of enormous value to future students and social historians.

Part II of the study, which it is hoped will appear in a later issue of the REVIEW, will consider the position of voluntary sterilization in other parts of the world.

There is another aspect of the subject—sterilization as a means of population control in over-crowded and under-developed countries. This has been studied by a Committee under the Chairmanship of the Bishop of Exeter which has now issued its report—*Sterilization: an Ethical Enquiry*. It is made clear that the Report has the authority of the Committee alone.

NOTES OF THE QUARTER

The Bishop of Leicester, Chairman of the Church Assembly Board for Social Responsibility, explains in his Foreword that there had been requests for advice, from Christian doctors in India, on the ethics of their participation in India's efforts to ward off the threat of an over-population crisis by sterilization among other means of family limitation. This situation had led the Board to invite a Committee to examine the question and report upon it.

Broadly, the Committee agreed that there were circumstances in which voluntary sterilization might legitimately be used. Although in the Christian ethic, sexual abstinence remains the ideal method of family limitation, it is recognized as being "out of the question" in the conditions of dire poverty, overcrowding and unremitting toil which is the lot of the masses in India and some others of the less developed countries.

We are not [they say] setting ourselves up as champions or advocates of sterilization as the sovereign remedy for over-population; we are not suggesting either to governments or to people what they ought to do. We may feel convinced—as the Indian government has shown itself to be convinced—that sterilization alone is no remedy for the existing problem, and that it will do nothing to alleviate the pressure of population without

far-reaching social, educational and economic advances as well. . . . But faced as we are by a situation in which a responsible government is pursuing, together with other ameliorative measures, a policy of persuasion for voluntary sterilization, and asked by Christian doctors and nurses involved in the carrying out of this policy for help in deciding for themselves how far they can co-operate, we are bound to conclude that we find no grounds on which to reply in terms of an absolute negative.

It is made clear that the Report is not concerned either with punitive or eugenic sterilization, though these aspects are briefly discussed.

The booklet calls for careful reading and merits detailed discussion in a later issue of the REVIEW. Much of the background material cited has already been discussed in these pages: *The Family in Contemporary Society* by the Reverend Dr. Sherwin Bailey (January 1959, 5, 239-45); *The Family and Population Control* by Hill, Stycos and Back was reviewed in January 1960 (51, 229-30); *Life, Death and the Law* in October 1961 (53, 162), while Appendix A, The Law of England on Sterilization, is a shortened version of the *British Medical Journal* article "The Legality of Sterilization: a New Outlook" which was reprinted in THE EUGENICS REVIEW in April 1961 (53, 1).